

Incident Report

Print Date/Time: 03/28/2016 12:30

Login ID: ss0139

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00005461

 Incident Date/Time:
 3/21/2016 5:42:52 PM

 Location:
 303 91ST AVE NE

LAKE STEVENS WA 98258

Phone Number: (425) 218-2344

Report Required: No Prior Hazards: No LE Case Number:

Incident Type: Collision
Venue: Lake Stevens

 Source:
 911

 Priority:
 3

 Status:
 3

Nature of Call:

Unit/Personnel

Unit Personnel
19D2 SS0112-Warbis

Person(s)

No. Role Name Address Phone Race Sex DOB

1 Reporting Party RUTHRUFF, JENNIFER

Vehicle(s)

Role Type Year Make Model Color License State

Disposition(s)

Disposition Count

R 1

Property

Date Code Type Make Model Description Tag No. Item No.

CAD Narrative

03/21/2016 : 17:44:17 SP0397 Narrative: BDCST 03/21/2016 : 17:43:43 SP0181 Narrative: LR/181

03/21/2016: 17:43:19 SP0181 Narrative: CC NON INJ, NON BLKING RP IN A JEEP VS MAILTRUCK



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER_	
2016-0000	5461

VICTIM WITNESS	NON-DISCLOSURE
NAME (LAST, FIRST, MIDDLE RACE ETHNICITY SEX D.O.B. AGE	HGT WGT HAIR EYES
White, James 5 V M 9/14/87 28	
STREET ADDRESS CITY 3 1	STATE ZIP (1802)
STREET ADDRESS 225 225 Th PI SW CITY Bothe	
HOME PHONE CELL PHONE WORK PH	IONE
425 402 8678 425 354 9135	
EMAIL ADDRESS (OPTIONAL)	EMPLOYMENT
	hake Steven 5
STATEMENT:	,
As I exited the 9210 Market Place apportment I was hit by the other vehicle roughly hatfun	1+ complex
I was hit by the other vehicle roughly hatfun	av through the
Clare	/
STILLY	
	3
I CERTIFY (OR DECLARE) UNDER PENALTY OF PURJURY UNDER THE STATE OF WASHINGTON THAT THE FORE	GOING IS TRUE AND CORRECT
SIGNATURE:	DATE SIGNED:
	3/21
OFFICER/NUMBER:	DATE/SIGNED:
J. WANGE 1/2	3/21/16
OUR MISSION STATEMENT: "INFERFLIEVE THAT RESERVING LIFE ENGLIPMENT LISTICE AND CHARDING DEL	**************************************

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURINGJUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE,
HEALTHY, AND PROSPEROUS COMMUNITY"

CASE NUMBER



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

STAVES	2016-00005461
VICTIM WITNESS V	non-disclosure
NAME (LAST, FIRST, MIDDLE Meyer Barbara Alice STREET ADDRESS GHO Market Place # E102 HOME PHONE NA EMAIL ADDRESS (OPTIONAL) STATEMENT:	NICITY SEX D.O.B. AGE HGT WGT HAIR EYES BYN H CITY STATE ZIP LAKE SHEVENS WA 98258 WORK PHONE
Driving east on Market Place tu into Fairweather Pointe (9210 mark Place until moul truck was able Could pull into condo. Car stopped turn. Mail truck docaded to go me docaded to go around mo. I behind me hit mail truck in No one appeared injured—	cet Place). Stopped on Market to exit Fairweatherte so D behind me waiting forme to o" at same time car behind remained stopped. Car
	,
I CERTIFY (OR DECLARE) UNDER PENALTY OF PURJURY UNDER THE STATE	OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT DATE SIGNED:

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURINGJUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE,
HEALTHY, AND PROSPEROUS COMMUNITY"

16-00005461, 032116 COLLISION REPORT

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1501071	2 3 27
	INTERSTATE CITY STREET V FIRE GESULTED 2	
1 1	STATE ROUTE OTHER OTHER LOCAL AGENCY CODING	
2 2	TRIBAL RESERVATION OBJECT STRUCK	1 8 28
3 1	M M D D Y Y Y Y TIME (2400) COUNTY# MILES DATE OF COLLISION 03	
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION BLOCK NO.	
4a 4a	MARKET PL 9300	1 9 29
5	DISTANCE OF (REFERENCE OR CROSS STREET) SR9 NE FEET V S W	
	UNIT 01 MOTOR VEHICLE PEDAL- CYCLE DAMAGE THRESHOLD MET YES NO NO DE 4253549135	0 1 30
6 1	LAST NAME WHITE FIRST NAME JAMES MIDDLE INITIAL S	
	STREET 225 225 PL SW	
7	CITY BOTHELL ST WA ZIP 980210000	1 2 31
8	CDL RESTRICTIONS ENDORSEMENTS 2	
9 9	DRIVER'S LICENSE # WHITEJS1300M STATE WA SEX M D.O.B. MDDYYYYY 09 - 14 - 1987	
10 9	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURY 1 NATURE OF INJURIES	1 2 32
11 2 5	LICENSE PLATE # 000000 STATE WA VIN# 1GBCS10A9P291464	
12 2 5	TRAILER PLATE # STATE TRAILER PLATE # STATE	
13 8	VEH. YEAR 1993 MAKE AMER MODEL JEEP STYLE GA VEHICLE TOWED YES NOV. REGISTERED OWNER INFO. U.S POST OFFICE 12101 36TH AVE NE LAKE STEVENS WA 98258 D: 4253974904 VEHICLE TOWED BY GOVT. VEHICLE YES NOV. VEHICLE NO. 1	5 1 33
14 8	UABILITY INSURANCE LIABILITY INSURANCE A POLICY # POSTAL SERVICE SELF INSURED A POLICY # 9.TOP B POP	7 3 ₃₄
15 2	VEHICLE LEGALLY VES NO CITATION # CHARGE CHARGE TO BOTTOM 7 6	
16 2	UNIT 02 VEHICLE V CYCLE PEDESTRIAN OWNER VES NO V D: 4252182344	4 35
	LAST NAME RUTHRUFF FIRST NAME JENNIFER MIDDLE INITIAL A	36
17	STREET NEW ADDRESS 2501 113TH DR NE	38
18	CITY LAKE STEVENS ST WA ZIP 982588427	39
19	CDL RESTRICTIONS B ENDORSEMENTS L	40
20	DRIVER'S LICENSE # RUTHRJA307N6 STATE WA SEX F D.O.B. MMDDYYYY 08 - 26 - 1970	
21	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE INJURYY 1 CLASS 1	
22	LICENSE PLATE # 043ZCE STATE WA VIN# 1J4GA691X8L593817	
23	TRAILER PLATE # STATE TRAILER PLATE # STATE	1 41
24	VEH. YEAR 2008 MAKE JEEP MODEL WRA4D STYLE 4W VEHICLE TOWED YES NO TOWED BY REGISTERED OWNER INFO. JENNIFER RUTHRUFF 2501 113TH DR NE LAKE STEVENS WA 98258 D: 4252182344 VEHICLE NO. 2	1 42
	LIABILITY INSURANCE V INSURANCE CO PROGRESIVE 66738856-7 INSURANCE V INSURANCE CO PROGRESIVE 66738856-7 INSURANCE V INSURANCE V INSURANCE CO PROGRESIVE 66738856-7 INSURANCE V INSURANCE CO PROGRESIVE 66738856-7 INSURANCE CO PRO	
25	VEHICLE YES NO CITATION # CHARGE STANDING 6 7 6	
26	OFFICER'S NAME (PRINT) STEVE WARBIS BADGE OR ID # AGENCY WA0311900	
	PART A 3000-345-159 R (7/06)	





CORRECTION

REPORT NO.

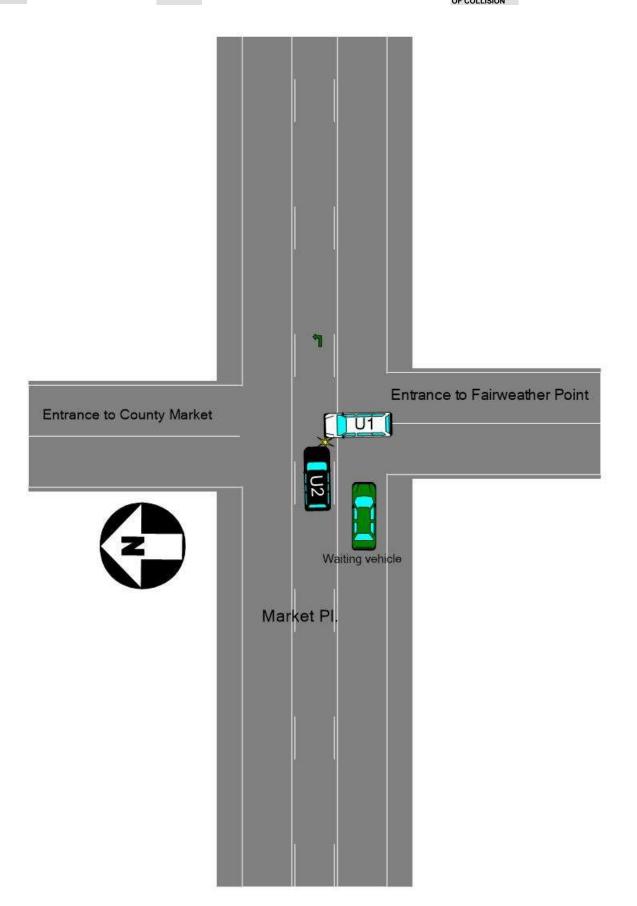
E528081

CASE #

2016-00005461

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NAME MEYER BARBARA A MEYER BARBARA A																					
ADDRESS & PHONE # 9210 MARKET PL #102 LAKE STEVENS WA 98258 4254188322							SEX F		D.O.B MDDYY]-[12	-	1949						
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NAME (LAST, FIRST, MIDDLE)	INITIAL)																				
ADDRESS & PHONE #												SEX		D.O.B MDDYY]-[-		
PASSENGER V	VITNESS	JNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELME USE	T	II (NJURY			NATURE C	F INJUR	IES	
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BADGE OR ID #	112		ORI#	MAG	311900				TIM	E POLICE	DISPATO		:44				POL.	ICE APP	IVED .	:53 PM	
PART		-160 R (7/06		VVAUS	311 3 00				LIIVII	_1 361061	J.OI AI O	5.	.44	- WI		CIIVIC		PAGE	2	0F	3
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REPORT NO. E528081 **CASE #** 2016-00005461 **DATE AND TIME** OF COLLISION 03/21/16 17:43





VICTIM WITNESS

NAME (LAST, FIRST, MIDDLE

EMAIL ADDRESS (OPTIONAL)

STATEMENT:

LAKE STEVENS POLICE DEPARTMENT

ETHNICITY

INCIDENT STATEMENT FORM

2016-0005461
NON-DISCLOSURE
D.O.B. AGE HGT WGT HAIR EYES BLUE STEVENT STATE ZIP 98258
WORK PHONE
PLACE OF EMPLOYMENT AUSPITAL
vas driving east
en a+ posttel fruck
14 Teffor & het my
2 side

CASE NUMBER

I CERTIFY (OR DECLARE) UI	NDER PENALTY OF PURJURY UNDER THE STATE OF W	ASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT
SIGNATURE:	MA	DATE SIGNED:
OFFICER/NUMBER:	Summer	DATE SIGNED/ 3-/~3//6

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